CAMPAIGN TREASURER'S REPORT SUMMARY MALL							
(1) WILLIAM BILL' JOLIE	16 AUG 16 PM 12: L2						
Name (2) // 02 N.E. 2ND. CT.	10 110 1112 42						
Address (number and street)	o = G						
City, State, Zip Code							
Check here if address has changed	(3) ID Number:						
(4) Check appropriate box(es):							
☐ Candidate Office Sought: ☐ Complete (PC)	MSSION SEAT # 3						
☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded						
☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an	☐ Check here if PTY has disbanded☐ Check here if no other IE or EC reports will be filed						
individual making electioneering communications)	Topolis will be filed						
(5) Report Identifiers							
	8 1 12 1 16 Report Type:						
☐ Original ☐ Amendment ☐ Sp	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$ 1, . 0 , 0 . C Expenditures \$, ,							
Loans \$, , .	Transfers to						
Office Account \$							
Total Monetary \$							
In-Kind \$, , .	Total Monetary \$, ,						
	(8) Other Distributions						
	\$ 						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$ 5,9,950	\$						
(11) Certification							
It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.) I certify that I have examined this report and it is true, correct, and complete:							
13.44	(2)						
(Type name) WILLIAM BILL TO (IAN) ☐ Individual (only for IE ☐ Treasurer or electioneering comm.)	(Type name) (A) (IAM BILL JO(IAN) [Defined and Defined and PTY)						
X Dellian Jalen	x Bellen Jalian						
Signature DS-DE 12 (Rev. 11/13)	Signature						
	SEE REVERSE FOR INSTRUCTIONS						

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

) Cover Period	124AM BU" 8161/6	throug	h <u>8</u> /	121/6	(4) Page	1_0	of
(5)	(7) Full Name		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	(Last, Suffix, First, Middle) Street Address &	Tuna	entributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
1/2 1/6	DANIEL K. ADKIN S480 S.W. 6044 DAVIE, FL. 33314	S I	PARITUELS	CHE		7	1,000
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<i>J J</i>							
<i>j j</i>							o
1 1	,						OITY CLERK
1 1							2: 42

1) Name WILLIAM BILL JOLIAN (2) I.D. Number								
 Name <u>v O /</u> Cover Period 	1 8 16 1 16 through 8 1	12116 (4) Page <i>[</i> .	of				
(5)	(7) Full Name	(8) Purpose	(9)	(10)	(11)			
Date (6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount			
/ / ,								
/ /								
/ /		A						
//								
//								
//								
//					OTY CLERK			
/ /					NDALLE X			